

GENERATOR COPY

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 0 8 6 5 7 0 0 1 9		Page 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address DOUGLAS AIRCRAFT COMPANY 190th & Normandie Ave. - Torrance, Ca 90502				A. State Manifest Document Number 84351226			
4. Generator's Phone (213) 533-6677				B. State Generator's ID			
5. Transporter 1 Company Name J. C. Liquid Waste Disposal		6. US EPA ID Number C A D 0 5 8 0 1 8 3 6 7		C. State Transporter's ID 55646		D. Transporter's Phone (213) 268-3137	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address CASMALIA P.O. BOX E, NTU Road Casmalia, CA 93429				10. US EPA ID Number C A D 0 2 0 7 4 8 1 2 5		G. State Facility's ID CAD 020748125	
				H. Facility's Phone 1-805-937-8449			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity	
				No. Type		Unit Wt/Vol	
a. Acid Liquid N.O.S. (Corrosive) WASTE				0 0 1 TT		005 0 0 0 G	
b.							
c.							
d.							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
Potassium Dichromate 7.3% P.H. 4.7							
Water 92.7% Permit 3-6468				08/14			
15. Special Handling Instructions and Additional Information Guide No. 60 Use gloves, goggles, respirator - May cause severe burns to skin and eyes. WO# 51845							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.							
Printed/Typed Name Donald C. Gerber				Signature <i>Donald C. Gerber</i>		Date 02/01/85	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Carlos Rodriguez</i>		Date 02/01/85	
Printed/Typed Name Carlos Rodriguez W.D.# 51845				Signature		Date	
18. Transporter 2 Acknowledgement or Receipt of Materials				Signature		Date	
Printed/Typed Name				Signature		Date	
19. Discrepancy Indication Space SCANNED							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. #38913-22,520/lbs							
Printed/Typed Name Casmalia Resources				Signature <i>Alice Geist</i>		Date 02/01/85	

SCANNED

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD086510005		Manifest Document No.		2. Page 1 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address DOUGLAS AIRCRAFT COMPANY 190th & Normandie Ave. - Torrance, Ca 90502						A. State Manifest Document Number 84351226					
4. Generator's Phone (213) 533-6677						B. State Generator's ID					
5. Transporter 1 Company Name J. C. Liquid Waste Disposal						C. State Transporter's ID 55646					
6. US EPA ID Number CAD058018367						D. Transporter's Phone (213) 268-3137					
7. Transporter 2 Company Name						E. State Transporter's ID					
8. US EPA ID Number						F. Transporter's Phone					
9. Designated Facility Name and Site Address CASHALIA P.O. BOX E, NTU Road Cashalia, CA 93429						G. State Facility's ID					
10. US EPA ID Number ICAD020748125						H. Facility's Phone 5305-937-8449					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total		14. Unit	
						No. Type		Quantity		M/Vol	
a. Acid Liquid N.O.S. (Corrosive) N/A 1760 WASTE						0 0 1 TT		005 0 0 0		G	
b.											
c.											
d.											
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above					
Potassium Dichromate 7.3% P.H. 4.7											
Water 92.7% Permit 3-6468											
15. Special Handling Instructions and Additional Information Guide No. 60 Use gloves, goggles, respirator - May cause severe burns to skin and eyes.											
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Printed/Typed Name						Signature			Date		
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20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.											
Printed/Typed Name						Signature			Date		

c/t

SCANNED